

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number 10/578,910-Conf. #3223	Filing Date May 12, 2008
		First Named Inventor Jun Hee RYU	Examiner Name K. M. Nguyen
		Art Unit 2839	
TOTAL AMOUNT OF PAYMENT	(\$) 210.00	Attorney Docket No.	3449-0621PUS1

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448	Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.15 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
							Small Entity
							Fee (\$) Fee (\$)
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							210 105
Multiple dependent claims							370 185
Total Claims Extra Claims Fee (\$) 12 20 = x =		Fee Paid (\$) =		Multiple Dependent Claims Fee (\$) Fee Paid (\$) = =			
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims Extra Claims Fee (\$) 4 3 = 1 x 210.00 = 210.00		Fee Paid (\$) =					
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) _____ _____ _____ _____	Fee Paid (\$) _____						
- 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)							
Non-English Specification. \$130 fee (no small entity discount)							Fee Paid (\$) _____
Other (e.g., late filing surcharge):							

SUBMITTED BY			
Signature 	Registration No. (Attorney/Agent) 39,538	Telephone (703) 205-8000	
Name (Print/Type) James T. Eler, Jr.		Date April 2, 2008	

AMENDMENT TRANSMITTAL LETTER

Docket No.
3449-0621PUS1

Application No.
10/579,910-Conf. #3223

Filing Date
May 12, 2006

Examiner
K. M. Nguyen

Art Unit
2839

Applicant(s): Jun Hee RYU et al.

Invention: CONTACT SPRING

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	12	- 20 =	0	x	50.00	0.00
Independent Claims	4	- 3 =	1	x	210.00	210.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						
Other fee (please specify):						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						210.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☒ Please charge Deposit Account No. 02-2448 in the amount of \$ 210.00 .
A duplicate copy of this sheet is enclosed.

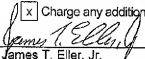
☐ A check in the amount of \$ _____ Is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 02-2448
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


James T. Eller, Jr.
Attorney Reg. No.: 39,538

Dated: April 2, 2008

BIRCH, STEWART, KOLASCH & BIRCH, LLP
8110 Gatehouse Road
Suite 100 East
P.O. Box 747
Falls Church, Virginia 22040-0747
(703) 205-8000